

SERIAL NUMBER 09/379,763	FILING DATE 08/24/99	CLASS 600	GROUP ART UNIT 3737	ATTORNEY DOCKET NO. BESSON-ET-AL
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APPLICANT

MARCUS BESSON, OBERHACHING, FED REP GERMANY; GOTTHART VON CZETTRIZ, MUNICH, FED REP GERMANY; RALPH BAX, MUNICH, FED REP GERMANY.

****CONTINUING DOMESTIC DATA*******

VERIFIED THIS APPLN IS A CON OF 08/985,673 12/05/97 Patent 5,957,854
 WHICH IS A CON OF ~~PCT/EP94/02926~~ 09/02/94 Patent 5,862,803
SE 08/605,197 3/1/96
 AND A CON OF PCT/EP94/02926 7/2/94

****371 (NAT'L STAGE) DATA*******

VERIFIED

SE

****FOREIGN APPLICATIONS*******

VERIFIED

SE

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 09/09/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY DEX	SHEETS DRAWING 6	TOTAL CLAIMS 66	INDEPENDENT CLAIMS 4
Verified and Acknowledged	Examiner's Initials <u>SE</u> Initials _____				

ADDRESS

EDWARD R FREEDMAN
1077 NORTHERN BOULEVARD
ROSLYN NY 11576

TITLE

WIRELESS MEDICAL DIAGNOSIS AND MONITORING EQUIPMENT

FILING FEE RECEIVED \$833	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 1686

SERIAL NUMBER 09/379,763	FILING DATE 08/24/1999 RULE	CLASS 600	GROUP ART UNIT 3762	ATTORNEY DOCKET NO. BESSON-ET-AL
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APPLICANTS

MARCUS BESSON, OBERHACHING, GERMANY;
GOTTHART VON CZETTRIZ, MUNICH, GERMANY;
RALPH BAX, MUNICH, GERMANY;

** CONTINUING DATA *****

THIS APPLICATION IS A CON OF 08/985,673 12/05/1997 PAT 5,957,854
WHICH IS A CON OF 08/605,197 03/01/1996 PAT 5,862,803
WHICH IS A 371 OF PCT/EP94/02926 09/02/1994

** FOREIGN APPLICATIONS *****

GERMANY P 43 29 898.2 09/04/1993

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 09/09/1999

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY GERMANY	SHEETS DRAWING 6	TOTAL CLAIMS 66	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

020306

TITLE

WIRELESS MEDICAL DIAGNOSIS AND MONITORING EQUIPMENT

FILING FEE RECEIVED 833	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input checked="" type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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GRANTED ** 09/09/1999

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Examiner's Signature _____ Initials _____					

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1077 NORTHERN BOULEVARD
ROSLYN, NY 11576

TITLE

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